c.

1. 2006 2:43PM Frishauf & Partners +12123195101 NO. 2013 PART B - FEE(S) TRANSMITTAL Compilete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSULTEE Commissioner for Patents MAY O 7 PARK P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 FIRE TIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appendix a further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicate a further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CUP RENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 02/03/2006 Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-7885, on the date indicated below. FRISHAUF, HOLTZ, GOODMAN & CHICK, PC 220 Fifth Avenue 16TH Floor NEW YORK, NY 10001-7708

(Depositor's name) (Signature) lan 5/1/06 VIA FAX (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/749,984	12/31/2003	Takashi Harakawa	03777/LH	9965	
TITLE OF INVENTION: IN	IK JET RECORDING APPA	ARATUS			

APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400)	\$300	\$1700	05/03/2006
EXAN	IINER	ART UN	IT .	CLASS-SUBCLASS	7	
VO, ANH T N		2861		347-093000	-	
FR 1.363). Change of corresponded from PTO/SB/1 The Address form PTO/SB/1 The Address indication of the PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI	tion (or "Fee Address" Indic or more recent) attached. Us D RESIDENCE DATA TO E an assignce is identified b a 37 CFR 3.11. Completion EE	Correspondence ation form of a Customer E PRINTED ON 7	(1) the na or agents (2) the na registered 2 registered 1 steed, no ITHE PATEN data will approximate 1 substitute (B) RESIDI	nting on the patent front page, I mes of up to 3 registered pate OR, alternatively, me of a single firm (having as attorney or agent) and the nared patent attorneys or agents. I name will be printed. T (print or type) Dear on the patent. If an assign for filing an assignment. ENCE: (CITY and STATE OR	a member a 2 FRI GOO f no name is 3	SHAUF, HOLTZ, ODMAN & CHICK, document has been filed for
lease check the appropriate	assimee category or catego	ries (will not be pr	. •	1	Corporation or other private g	group entity Governmen
The following fee(s) are Nissue Fee Publication Fee (No	enclosed: small entity discount permitt f Copies	4ł ed)	b. Payment of	patent): Individual	enclosed. 38 is attached.	
The following fee(s) are Nissue Fee Publication Fee (No and Advance Order - # o Change in Entity Status	enclosed: small entity discount permitt f Copies	ed) :) 37 CFR 1 27.	b. Payment of A check Payment The Dire Deposit	Fee(s): Individual Fee(s) is estyle to credit card. Form PTO-203	enclosed. 38 is attached. harge the required fee(s), or considerable exceptions and exceptions.	redit any overpayment, to tra copy of this form) CFR 1.27(g)(2).

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PAGE 1/3 * RCVD AT 5/1/2006 2:36:55 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-3/17 * DNIS:2732885 * CSID:+1 212 319 5101 * DURATION (mm-ss):02-40

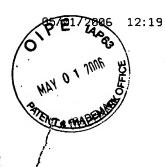
05/02/2006 EFLORES1 00000022 10749984 01 FC:1501 1400.00 OP

02 FC:1504

300.00 DP

03 FC:8001

3.00 OP



TRANSMISSION VERIFICATION REPORT

TIME : 05/01/2006 08:24 NAME : BARGAS & RODRIGUEZ FAX : 3618850086 TEL : 3618850080 SER.# : 000E4J271952

DATE, TIME FAX NO./NAME DURATION PAGE(S) RESULT MODE

05/01 08:24 15712732885 00:00:42 06:00:42 0K STANDARD ECM